PATENT APPLICATION FEE DETERMINATION RECORD

Effective Casher 2 2004

Application or Docket Number

10/624506

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER THAN | | |
|----------------------------------|---|--|---------------------------------------|-----------------------------------|--------------------|------------------|-------|-----------------------------|------------------------|----------|---------------------|------------------------|--|
| - | | ······ | . (Column:1) (Co | | (Colu | mn 2) | | TYPE [| | _ ೦೧ | SWALL | EKTITY | |
| Ľ | OTAL CLAIMS | · · · · · · · · · · · · · · · · · · · | | | | | | RATE | FEE | _ | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FE | 395.00 | OR | BASIC FEE | 790.00 | |
| Τ | TAL CHARGE | ABLE CLAIMS | minus 20= | | • | | | X\$ 25 | ' | OR | ·X501=. | | |
| INI | DEPENDENT C | CLAIMS | minus 3 = | | | | | Xw= | | OR | ×200= | ; | |
| Mi | JLTIPLE DEFE | NDENT CLAIM F | RESENT | | • | | | +150= | | OR | +300= | 7 | |
| • 11 | the difference | e in column 1 is | less than zero, enter "0" in column 2 | | | | TOTAL | | OR | TOTAL | | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | • | . | OTHER | THAN | |
| | | (Column 1) | (Column 2) | | | (Column 3) | | SMALL | ENTITY | OR | SMALL | | |
| MENDMENTA | 217/05 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | SER | PRESENT EXTHA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| NON | Total | . 20 | Minus | -21 | 0 | = / | | X25= | | OR | X\$50= | / | |
| AME | Independent | 1. 3 | Minus | S | <u>3</u> | 7 | | X-140 : | | OR | X200=/ | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +150= | | OR | +300= | | |
| | | | | | • | | . 1 | TOTAL CONT. FEE | | OR | TOTAL ADDIT, FEE | | |
| | | (Column 1) (Column 2) (Column 3) | | | | | | | | - | | | |
| AMENDMENT B | · | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PASVIO PAID F | EST EER USLY | PRESENT EXTRA | | RATE, | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | ٠ | Minus | ** | | = | | ×25 = | | OR | X\$50= | | |
| ME | Independent | * | Minus | #11 | | = | | ×100= | | OR | X200= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | 07 | 724 | | |
| | | | | • | | A 360 | L | +150= TOTAL | | OR | +300= | | |
| | | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER - AMENDMENT | | HIGHE NUMB PREVIO PAID F | ER USLY | PRESENT EXTRA | Ĺ | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus - | ** | | = | | X25 = | | OR | X\$50 = | | |
| | Independent | • | Minus | *** | | = | | ×100 = | | OR | X200: | | |
| لــا | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 1 | +150= | | OR | +300= | | |
| ** 1 | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." | | | | | | | | | O₽. | TOTAL DDIT, FEE | | |
| *** | the Highest Nu | rhber Previously Paid ber Previously Paid | LE FOR IN THE | S SPACE IS | less than | 3, enter "?" | | OOIT. FEE L d in the app | ropriate box | | | • | |